| PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 | | | | | 10/5900 Cli- | | | |
|---|--|--|---------------|------------------------|--------------|-------------------|------------------------|--|
| COCLAIMS AS FILED - PART I | | | | | | | | |
| TOTAL CLAIMS | (Column 1) | (Column 2) | SMALL TYPE | ENTITY | OR | OTHE SMAL | R THAN L ENTITY | |
| FOR | | | RATE | FEE | | RATE | FEE | |
| TOTAL CHARGEABLE CLAIMS | NUMBER FILED | NUMBER EXTRA | BASIC F | EE 375.00 | OR | BASIC FE | | |
| INDEPENDENT CLAIMS | 7 minus 20= | 0 | X\$ 9= | = | OR | ļ | 0 | |
| MULTIPLE DEPENDENT CLAIM PE | minus 3 = | | X42= | | OR | X84= | 0 | |
| * If the difference in column 1 is l | ess than zero, enter "0 |)" in column 2 | +140= | - | OFI | +280= | 0 | |
| 9-25-0 CLAIMS AS AMENDED - PART II TOTAL OR TOTAL OR TOTAL | | | | | | | | |
| (Column 1) | (Column | 2) (Column 3) | SMALL | ENTITY | OR | OTHER SMALL | THAN | |
| AFTER AMENDMENT | NUMBER PREVIOUS PAID FOR | PRESENT LY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Independent * 2 | Minus *** 30 | = 0 | X\$ 9= | | OR | X\$18= | O | |
| FIRST PRESENTATION OF MUL | TIPLE DEPENDENT CL | AIM 🗍 | X42= | | OR | X84= | 0 | |
| | | | +140= | | OR | +280= | 0 | |
| (Column 1) | | | ADDIT. FEE | | OR 🔽 | TOTAL OIT. FEE | 0 | |
| CLAIMS | (Column 2) | (Column 3) | | | | | | |
| REMAINING AFTER AMENDMENT Total Independent * Min | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL | |
| Mil | nus ** | = | X\$ 9= | | - | | FEE | |
| Independent * Min | nus *** | = | } | C | R | \$18= | | |
| FIRST PRESENTATION OF MULTI | PLE DEPENDENT CLAI | М | X42= | o | R_> | (84= | | |
| | | | +140= | 0 | R + | 280= | | |
| (Column 1) | 6 | | ADDIT FEE | 0 | ADD F | TOTAL IT. FEE | | |
| CLAIMS REMAINING | (Column 2) HIGHEST | (Column 3) | | | | | | |
| AFTER AMENDMENT Total | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE TI | ADDI- ONAL FEE | R | ATE TI | ADDI- ONAL | |
| Independent | | = | X\$ 9= | | 1 | | FEE | |
| i Minu | S MAY | | | OR | X\$ | 18= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42= OR X84= | | | | | | | | |
| If the entry in column 1 is less than the entry If the "Highest Number Proviously Paid For" If the "Highest Number Previously Paid For The "Highest Number D | | | +140= | OR | +28 | | | |
| If the "Highest Number Previously Paid For" The "Highest Number Previously Paid For" ("Highest Number Previously Paid For") | IN THIS SPACE is less than Total or Independent) is the | i cu, enter "20." AL n 3, enter "3." AL highest number found | DOIT. FEE | OR OR | ADDIT. | FEE | _ | |
| The "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE ADDIT. FEE PTO-878 (Rev. 1202) U.S. Government Refer or 1. | | | | | | | | |